LOUISIANA Department of HEALTH and HOSPITALS
Office of Public Health

Ultraviolet Tanning

Fact Sheet

Ultraviolet tanning facilities are inspected by regular sanitarian staff under the authority of state law (LSA R.S. 40: 2701-2719) and department regulation (49:8.0000-49:8.0250). The current program goal is to inspect each facility at least once per calendar year to verify compliance with applicable rules and regulations. With 13 active field staff conducting these inspections and an inventory of approximately 800 facilities at present, with more opening on an almost-daily basis, this presents a challenge. Less funding means fewer inspections which translates to an increased risk that members of the public may suffer serious injury as a consequence of operators failing to follow equipment manufacturer's instructions and/or state regulations regarding the safe operation of UV tanning equipment.

Objective

UV tanning facility inspection and regulation helps to ensure that the public is not harmed by negligent or poorly-trained equipment operators at such facilities. UV tanning, when not done under the supervision and direction of a licensed operator, can result in serious injuries.

Performance Indicators

- **# inspections performed: # inspections required**

Narrative

UV tanning laws and regulations require that sanitarians issue a registration to facilities that meet regulatory and statutory requirements once an inspection has been conducted to verify such compliance. Facility registrations are tracked in a database maintained by clerical staff. Each facility must have at least one registered operator associated with it. Routine inspections are conducted by sanitarian staff to ensure that facilities that have been permitted in the past continue to comply with relevant mandates.

Better Health

Regulation of commercial use of ultraviolet-radiation-emitting devices is an important factor in the protection of the health of Louisiana citizens and visitors. While it is important for citizens to take a proactive role in being guardians of their personal health, it is difficult or impossible for them to do so in the absence of accurate information regarding the risks of using and the approved methods of use of such devices. People will engage in risky or unhealthy behaviors such as tobacco use, but just as the U.S. Food and Drug Administration carefully regulates what components may be used in the manufacture of tobacco products for human consumption, it is critical that regulatory authorities ensure that UV tanning equipment is manufactured, marketed, and utilized in ways that are both safe and accurate.

The American Academy of Dermatology Organizations has stated its opposition to the use of indoor tanning equipment for non-medical purposes (http://www.aad.org/media/background/factsheets/fact_indoortanning.html). The U.S. Department of Health and Human Services has declared indoor UV tanning equipment a known carcinogen (*op. cit.*). Several peer-reviewed studies have posited definite links between use of such equipment and development of melanomas (*op. cit.*). Commonly-cited code violations include failure to utilize the correct lamps in a device, failure to document exposure times and dates of visits of individual clients, failure to have a trained operator present when clients are using devices, failure to post appropriate signage, and failure to replace cracked or faded acrylic shields in devices. Any one of these items poses a danger to an unwitting client. Using or replacing existing lamps with incompatible units may result in clients obtaining more or less exposure than intended by the manufacturer; this in turn can lead to the operator inadvertently giving the client inaccurate directions for use or even wantonly exceeding the maximum exposure time in an effort to provide a "good tan." Failure to document exposure times and visit dates may result in clients tanning too much in one session or too frequently, leading to burns and/or other injuries. Operators who are not trained in accordance with regulatory requirements may be unfamiliar with requirements and different skin groups that should receive different exposures. In the absence of necessary signage and/or trained operators, clients may be unaware of important warnings regarding medications that enhance photosensitivity or even of the correct place to stand in a booth device. Finally, acrylics that have cracked or grown opaque may break, leading to burn and possible laceration injuries and may also absorb substantial amounts of the radiation emitted by the lamps.